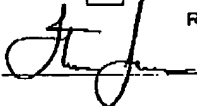


SEP 19 2005

PTO/SB/22 (10-04)

Approved for use through 7/31/2006. OMB 0851-0031
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (fees effective on or after October 1, 2004)		Docket Number (Optional) 55577 (70820)	
Application Number 09/777,314		Filed February 5, 2001	
For SOLID-STATE IMAGE PICKUP DEVICE WITH DISCHARGE GATE OPERABLE IN AN ARBITRARY TIMING			
Art Unit 2615		Examiner G. Selby	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120.00	\$60.00	\$
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450.00	\$225.00	\$ 450.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1,020.00	\$510.00	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,590.00	\$795.00	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,160.00	\$1,080.00	\$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-1105</u> . I have enclosed a duplicate copy of this sheet.			
09/20/2005 SDENB051 00000050 041105 09777314			
I am the	<input type="checkbox"/> applicant/inventor.	01 FC-1235 450.00 DA	
	<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.	Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	
	<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>42,693</u>		
	<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).		
	Registration number if acting under 37 CFR 1.34(a) _____		
		<u>September 19, 2005</u>	
Signature		Date	
<u>Steven M. Jensen</u>		<u>(617) 439-4444</u>	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/>	Total of <u>1</u> forms are submitted.		

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the U.S. Patent & Trademark Office by facsimile number 571-273-8300 on September 19, 2005.

Dated: September 19, 2005

Signature:  (Steven M. Jensen)